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ABSTRACT

Based on a survey of state officials and interviews with representatives of professional organizations, the paper analyzes policy problems and alternatives regarding certification and licensure requirements for related services personnel working with handicapped students. Chapter I reviews policy aspects in federal statute, regulation, and litigation. The state of the art regarding state practices in personnel standards for occupational therapists, physical therapists, social workers, speech-language pathologists, school pycholcgists, and school nurses is discussed in Chapter II. The third chapter examines such issues as title protection vs. activity restriction, potential legal conflicts, traditional training inadequacies, and dual standards. Options are presented in Chapter IV for two policy areas: policy gaps and conflicts and supplementing professional preparation. A final chapter lists questions for state policy makers in determining needed policies and procedures. (CL)

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POLICY OPTIONS REGARDING CERTIFICATION AND LICENSURE REQUIREMENTS FOR RELATED SERVICES PERSONNEL

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September 1979

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INTRODUCTION

This paper is one of a series being developed by the Policy Options Project of The Council for Exceptional Children with support from the Bureau of Education for the Handicapped, United States Office of Education. The purpose of the Project is to produce, evaluate and disseminate policy options papers to facilitate the successful implementation of P.L. 94-142 and Section 504.

Among the issues of most concern to education policy makers is that of personnel development. Since the enactment of the P.L. 94-142 regulations, states have been federally directed to establish or approve personnel credentialing requirements. As state and local education agencies strive to meet the unique educational needs of handicapped children, they must insure that policies are in place to guarantee the availability of qualified personnel to meet those needs. Increasingly, school districts are contracting with other agencies to provide some of the services handicapped students require. The potential for more interagency coordination is great. The Office of Handicapped Individuals' catalog lists nearly 130 different federally-funded programs focused on the handicapped.

> Given the array of agencies and organizations involved in...programs for the handicapped--and given also the various legislative mandates--it is almost inevitable that problems will arise from such matters as the lack of common standards... (p. 70)

This statement from the January 1979 Report to Congress on the Implementation of P.L. 94-142 from the Office of Education sums up the problem well. If state education agencies are to exercise their oversight responsibilities and exert creative leadership in the future of education, they must be able to understand and resolve the potential policy conflicts which may result when several agencies work together.

One potential source of conflict is the lack of common standards for personnel working with the handicapped. Depending on the employing state or agency, personnel qualifications may include a bachelor or master's degree, an internship

or practicum of varying length, specific course requirements in addition to a college program, passing score on one or more state-wide examinations or other requirements. Personnel currently have to meet several sets of standards. Standards have been established, for example, for graduation from college or training school, for membership into professional organizations, for employment in schools, for employment in other settings, for private practice and so on. This tier on tier proliferation of personnel standards creates a burden for the practitioner and a challenge for policy makers.

One such challenge arises from the sole state agency responsibility borne by state education agencies as a result of P.L. 94-142. Assurance of compliance with state and local education agency standards requires careful policy analysis among the various agencies, schools, and other facilities providing services to handicapped students. An additional factor to be considered is the reimbursement policies of insurers and other third party payers. Loss of revenues from these sources due to differences in staff qualifications accepted by third party payers can have a significant impact on school districts.

Not surprisingly this example raises issues of public versus professional and private interests and the link between such policies and the maintenance of classic medical model approaches to training and service delivery.

The origins of personnel standards are found to extend from the policies of professional organizations through the statutes and regulations of the various states to the various agencies delivering services to the handicapped. Today, there are standards for hospitals, institutions, mental health centers, rehabilitation facilities, day care programs and more. All of these include standards for personnel. Many of these base such standards upon approval by one of two legally constituted credentialing processes--licensing or certification. According to Shimberg and Roederer (1978):

> Licensing is a process by which an agency of government grants permission to an individual to engage in a given occupation upon finding that the applicant has attained the minimal degree of competency required to ensure that the public health, safety, and welfare will be reasonably well protected. (p. 1)

Licensing laws enacted in the states and administered by special licensing boards make it illegal for anyone without the license to provide the service in question.

Certification, on the other hand, does not restrict the activity itself but merely the legal use of a title. Hopke (1968) defines certification as "state requirements and approval of a person's work experience and/or educational preparation to qualify for a particular position." In education, a credential called a "certificate" is issued by each of the state education agencies, certifying the individual's eligibility to work in a particular job capacity in the state education system.

The differences between the requirements of these two processes as they impact the delivery of services to handicapped children are the subject of this paper. Policies regulating selected personnel standards in education will be presented in an attempt to provide information regarding policy options which may be used by decision makers in state government and state education agencies confronting decisions regarding the credentialing of various personnel.

Methodology

The data presented and analyzed in the following chapters result from an analysis of state policies and practices in the two credentialing processes of certification and licensure, a review of professional literature relating to personnel standard regulation practices and personal interviews.

Throughout this paper, unless indicated otherwise, the term certification refers to the credentialing process of state education agencies. Data on these

requirements were obtained from the Policy Research Center of The Council for Exceptional Children. In the fall of 1979, the Policy Research Center undertook a preliminary exploration of current and emerging policy trends relative to the personnel standards set by state education agencies. A survey of all 50 states' officials listed in the 1979-80 Directory of the National Association of State Directors of Teacher Education and Certification (NASDTEC) was conducted to determine current practices in certification.

The other credentialing process discussed in this paper is licensing. This term will be used throughout in referring to the state statutorily established control over who may legally engage in the practice of the profession in the state. Information regarding state licensing policies was obtained from the literature review, from interviews with several authors of the publications cited in this paper as well as with representatives of professional organizations and from an analysis of selected licensure laws.

This research methodology has indicated a need for clarification of the state education agencies' responsibility regarding the assurance of qualified personnel to meet the needs of handicapped students. To enable policy makers to be able to refine personnel policies, options will be presented in the following areas:

- Identifying the differences between requirements for certification and licensure;
- Developing policies where gaps or conflicts between these processes exist; and
- Policy alternatives relative to the unique needs of handicapped children.

Chapter I
FEDERAL AND JUDICIARY POLICY REQUIREMENTS FOR PERSONNEL STANDARDS

The purpose of this chapter is to present the policy requirements regarding the qualifications of personnel needed to deliver a free appropriate public education to handicapped students. In order to do this, current federal legislation as well as relevant court decisions will be analyzed for their implications regarding the policy and procedural requirements for personnel standards relevant to the education of handicapped children. Although it is recognized that such policies may set forth minimum requirements which may or may not be supplemented in the various states, it is important for policy makers to distinguish legal policy requirements from professional practices and expert recommendations, some of which will be explored in Chapter II of this paper.

Current Federal Policy

Crucial to the delivery of quality special education and related services to handicapped students is the competence of those directly involved in providing the services. In recognition of the correlation between a free appropriate public education and the capabilities of those providing it, Congress required in 1975 that each state participating in The Education for All Handicapped Children Act of 1975 (P.L. 94-142) must develop and implement a comprehensive system of personnel development (CSPD). As set forth in Regulation, the CSPD must include among other requirements, "procedures to insure that all personnel necessary to carry out the purposes of the Act are qualified..." (§121a.380(b)). As defined in Regulation §121a.12 "qualified" means:

> ...that a person has met State education agency approved or recognized certification, licensing, registration, or other comparable requirements which apply to the area in which he or she is providing special education or related services.

Clearly all those who are "providing special education or related services" must meet the standards of the state education agency for such personnel. To identify which personnel are included in this requirement, it is necessary to examine the definitions of special education and related services found in the following paragraphs:

> The term 'special education' means specially designed instruction, at no cost to parents or guardians, to meet the unique needs of a handicapped child, including classroom instruction, instruction in physical education, home instruction, and instruction in hospitals and institutions. (P.L. 94-142, Sec. 602(16))

> The term 'related services' means transportation, and such developmental, corrective, and other supportive services (including speech pathology and audiology, psychological services, physical and occupational therapy, recreation, and medical and counseling services, except that such medical services shall be for diagnostic and evaluation purposes only) as may be required to assist a handicapped child to benefit from special education, and includes the early identification and assessment of handicapping conditions in children. (P.L. 94-142, Sec. 602(17))

In addition, §121a.344(a), which governs participants at individualized education program (IEP) meetings, sets forth another type of personnel who must be "qualified" for purposes of P.L. 94-142. This section of the regulations requires this meeting to include: "(1) A representative of the public agency, other than the child's teacher, who is qualified to provide, or supervise the provision of, special education." (Emphasis added.)

Section 504 of the Rehabilitation Amendments of 1973 reaffirms this last requirement regarding the agency representative at IEP meetings by stating:

> Implementation of an individualized education program developed in accordance with the Education of the Handicapped Act is one means of meeting the standard established in paragraph (b)(1)(i) of this Section (that is that education be provided to meet the needs of handicapped students as adequately as the needs of nonhandicapped students are met). (§84.33(b)(2), Sec. 504 Regulations)

In addition, Section 504 Regulations makes a direct reference to personnel qualifications in §84.35 by requiring that assessment materials used to identify handicapped persons "are administered by trained personnel in conformance with

the instructions provided by their producer."

Regulatory Interpretations

It becomes necessary to understand the distinction between qualified and trained as having implications for future policy development. As indicated above, Section 504 requires that "trained" personnel conduct preplacement assessments of handicapped students. The statutory language of P.L. 94-142 itself in Section 613(a)(3) requires "appropriately and adequately prepared and trained" personnel to carry out the provisions of the Act. The commentary and analysis accompanying the regulations to this Act explain that this statutory language "has been interpreted by the use of the term 'qualified' to mean certification, regulation, or licensing. These are commonly accepted procedures for determining if personnel are 'appropriately and adequately prepared and trained'" (Federal Register, Vol. 42, No. 163, August 23, 1977, p. 42509).

Thus, while several commenters to the proposed regulations were reported in opposition to wide ranging (i.e., exclusive certification interpretation) certification requirements (Regs., p. 42509) and while the statutory language itself allows for broader interpretation, certification or a comparable procedure is required for all special education and related services personnel by virtue of federal regulation.

Those Not Included

As a point of distinction, the above analysis reveals by a process of elimination, the types of education personnel who are not required to be certified by these two federal mandates. No rationale appears to exist in either P.L. 94-142 or in Section 504 for specific certification or similar policy requirements for regular education teachers, paraprofessionals, hearing officers,

surrogate parents, principals (unless they are the agency representative at IEP meetings described in §121a.344(a)), physical education teachers (unless providing "specially designed physical education," i.e., by definition a "special education" service) or any other education personnel.

Thus, while many states (see Table 1) have recognized, for example, a need to change the certification requirements for regular educators in response to P.L. 94-142 (PRC 1979, AACTE 1979), this author concludes based on research for this paper that the rationale for this trend must be found in professional judgment rather than in the federal policies which are the focus of this chapter.

Table 1
SPECIAL EDUCATION PREPARATION REPORTED FOR
REGULAR EDUCATION TEACHER CERTIFICATION

I. Special Education Coursework Specified

Alabama	Kentucky	North Carolina
California	Louisiana	Oklahoma
Colorado	Massachusetts (1982)	Oregon
Georgia*	Mississippi	Tennessee
Illinois (1981)	Missouri	Wisconsin (1981)
Kansas	Nevada	

*or equivalent experience

II. Regular Teacher Required to have knowledge, Information or Experience Relative to Special Education

Indiana	Texas	Washington
Nebraska	Utah	West Virginia
	Virginia	

III. Special Education Requirement Being Considered

Arkansas	Maryland	Montana
Iowa	Michigan	New Hampshire

The Policy Base in Litigation

Judicial recognition of the relationship between personnel qualifications and the provision of appropriate services can first be identified in the landmark suits involving institutionalized handicapped clients. Two tactics were taken by courts to guarantee appropriately trained personnel for the plaintiffs in these cases. One method, established in the well-known Pennsylvania Association for Retarded Children (PARC) v. Commonwealth of Pennsylvania, (334 F. Supp. 1260, E.D. Pa. 1971), was to require standards be set by defendents in a plan submitted to a special Master. In such cases the Master charged with compliance oversight of the Court's decisions and orders, would review and monitor the recruitment, hiring, training qualifications, and staffing requirements specified in this plan.

The second method Courts used to assure adequate numbers of qualified personnel to meet the needs of plaintiffs was to establish standards directly by court order or decree. In Wyatt v. Stickney, the Court found that defendents had failed to develop and implement minimum standards for adequate treatment of mentally ill and mentally retarded plaintiffs in the states' institutions, including personnel standards. Alabama Judge Frank M. Johnson found on December 10, 1971:

> In the matters presented to this Court by the parties there seem to be three fundamental conditions for adequate and effective treatment programs in public mental institutions. These three fundamental conditions are: (1) a humane psychological and physical environment, (2) qualified staff in numbers sufficient to administer adequate treatment, and (3) individualized treatment plans... (emphasis added, 334 F. Supp. at 1343)

Subsequently, the Court ordered specific minimum standards which included definitions of qualified mental retardation professionals, including psychologists, social workers, special education teachers, physical therapists, occupational therapists and others based on degrees earned from an accredited program.

Similarly, the Consent Decree in Welsch v. Likins included staffing requirements. In December 1977 the Court in this case reaffirmed two previous orders (October 1, 1974 and April 15, 1976). In addition to the establishment of staff to resident ratios, the Welsch Court also defined the qualifications of staff.

In recognition of existing credentialing processes, the Court in the famous Willowbrook case (NYARC and Parisi v. Rockefeller, 72 CIV. 356, 357, Appendix A, April 22, 1975) ordered the institution to "actively recruit qualified staff including top level management and professionals, whose licensure, certification or qualifications would be suitable for practice or employment in comparable circumstances in the community." Further, it was ordered that all professional employees at Willowbrook meet these licensure, certification or registration standards. Thus these authorities were, in effect, extended to include personnel in state facilities.

One of the criteria of such standards used in the plaintiff's brief in Horacek v. Exon (Neb. CV 72L 299), is that they meet the specificity requirements of "justiciability." That is, that they be "reasonably specific, judicially ascertainable and manageable" (p. 11). Among others, Courts in Wyatt, Welsch and Ricci v. Greenblatt, (Civ. No. 72-469F)(E.D. Mass. preliminary injunction order filed February 11, 1972) have found it indeed possible to meet this specificity requirement in their orders.

The approach of the Welsch Court demonstrated its ability for such specificity by framing requirements for different levels of staff including supervision staff, professional staff, semi-professional staff, direct care staff and support staff. As in Wyatt, professional staff requirements in Welsch, were based upon the definition of "qualified mental retardation professional" as defined in federal regulations for certifying Intermediate Care Facilities for the Mentally Retarded to participate in State Medicaid programs (Title XIX, Social Security Act). These

requirements, defined in 45C §249.12(c)(3), 39 Fed. Reg. 2226 (January 17, 1974) as amended by 42 Fed. Reg. 28702 (January 3, 1977), rely upon certification methods for a determination of qualifications.

As is shown by these examples, there exists in both federal regulation and case law a policy base affirming the critical relationship between personnel qualifications and the adequacy of services provided to handicapped individuals.

Summary of Minimum Policies

The preceding discussion traced the development in policy for standards for personnel engaged in working with handicapped populations. Minimum policy and procedural requirements which have been identified from the sources discussed are presented below.

State and local education agencies must establish policies regarding personnel to include at least the following:

1. All personnel engaged in providing special education or related services to handicapped individuals must be qualified to do so.
2. The State must establish or approve appropriate credentialing requirements for such personnel.
3. Credentialing requirements may include certification, licensing, registration or comparable requirements. These terms are defined as follows (Hopke, ed., 1968):
   - certification - state education agency requirements and approval of a person's work experience and/or educational preparation to qualify for a particular position;
   - licensing - mandatory requirement of state approval for practice of some kinds of occupations for all those involved in the occupation;
   - registration - a record-keeping process which may be used in conjunction with either of the above credentialing processes.

4. The personnel standards must include possession of at least a bachelor's degree, as long as this is the minimum degree included in state standards.

Chapter II
CURRENT STATE PRACTICES REGARDING PERSONNEL STANDARDS

This chapter will explore some of the differences between the two credentialing systems of licensure and certification in an attempt to highlight the policy implications for program administrators and state and federal policy makers.

Rationale for Credentialing Systems

The policy requirements discussed in Chapter I are implemented through certification by state education agencies or licensing boards. Certification in education, like licensing in other occupations or trades, is intended to protect the public from incompetent practitioners (Levitov, 1976). Shimberg and Roederer (1978) point out that "the public seems to have accepted licensing as a restriction that is needed to protect society from incompetents and charlatans" (p. 1). They continue by summarizing the arguments for licensing proposed by trade and professional groups which include assuring consumers of high-quality goods and services. Hebeler and Reynolds (1976) point out two main criticisms of credentialing practices raised among educators. The first is that credentialing may have been overstressed generally in our society, resulting in a proliferation of unnecessary restrictions. The second is that the credentialing process itself becomes the self-serving instrument of professionals being licensed or the institutions training them. This later criticism is reiterated by Shimberg and Roederer (1978) who cite examples of restrictions in state licensing laws which seem to benefit the professional groups more than consumers.

> Boards sometimes make decisions that serve the economic interests of the occupational group rather than those of the public. For example, a board may tighten entry qualifications or raise the passing score (of a statewide examination) in order to limit the supply of practitioners. They may also pass rules that prohibit price advertising or

'unprofessional conduct'. Restrictions on the flow of truthful information concerning fees, qualifications, and professional attainments clearly hamper the consumer's ability to shop for services. Competition is lessened, thereby reducing downward pressure on fees.

Many licensing statutes substantially adopt the private ethical code of the profession. These ethical codes are the source of many anticompetitive rules and statutory provisions." (p. 11-12)

Traditionally, licensing boards approved the credentials of persons in health services fields, trades and industrial occupations. Such boards regulate the qualifications of staff in hospitals, rehabilitation centers, institutions and in private practice. Thus, licensing boards control those who work with handicapped populations in these settings. In the present decade, we have witnessed acceptance of responsibility for the education of persons in these settings. As is widely known, P.L. 94-142 and Section 504 made this responsibility national policy, charging the state education agency as the sole state agency responsible for the supervision of education. Another significant outcome of these two federal laws is that handicapped children must now receive whatever related services (defined in Chapter I) they need to enable them to benefit from special education. As a result, an increasing number of professionals from health services and related fields are providing services in public school either as employees or as consultants under contract.

Certification of some of these professionals is required in some states. The first statewide certification system began in Ohio in 1825. Originally county boards or superintendents were given the responsibility to approve candidates based on preparation requirements or standardized examinations. This system has been reduced in the twentieth century from some three thousand local authorities to the present fifty state system and a few large city districts such as New York City, Chicago and Baltimore which retain special authority (Study Commission (1976) p. 102).

Current Practice in the Credentialing of Related Services Personnel

Research indicates that the types of related services personnel currently certified by state education agencies include: school psychologists, social workers, occupational therapists, physical therapists, guidance counselors, school nurses, psychometrists/educational diagnosticians, peripatologists and speech-language pathologists, although speech-language pathologists may be classified as special education teachers in some circumstances (PRC, 1979).

While psychometrists and educational diagnosticians are not synonomous terms, the requirements for certification of these two groups was not differentiated in research data. On the other hand, licensure requirements for occupational therapists, physical therapists, speech-language pathologists, social workers, nurses and psychologists have been identified in some states.

Since credentialing is authorized separately for each individual profession, understanding the policy implications requires an examination of the status and trends of regulation standards regarding personnel in each field. The following sections of this chapter will identify the credentialing requirements for related services personnel by category.

Occupational Therapist (OT)

As can be seen in Table 2, twenty-two state education agencies certify occupational therapists and thirteen states issue licenses. A careful examination of the table reveals a total of thirty states with one or the other requirement, indicating there may be states with policy gaps in this area. It should be recalled that P.L. 94-142 requires that a person meet the "state education agency approved or recognized certification, licensing, registration or other comparable requirement." Where no certification or licensing requirements have been established, states will need to develop appropriate policy in order to satisfy the requirements of this Act. Five states, Florida, Maryland, New Hampshire, New

York and Ohio require both a license to practice and certification to work in the state's public schools. Two states, Arizona and West Virginia are considering certifying OTs.

Table 2
STATE PROCEDURES FOR THE REGULATION OF OCCUPATIONAL THERAPISTS

I. States Reporting Certification Requirements (N=22)

Alabama	Illinois	Nebraska	Texas
Alaska	Iowa	New Hamshire	Virginia
California	Kansas	New Jersey	Washington
Colorado	Louisiana	New Mexico	Wisconsin
Delaware	Maryland*	New York*	
Florida*	Montana	Ohio*	

II. States Where Licensure Requirements Have Been Identified (N=13)

Arkansas	Hawaii	Ohio*	West Virginia
Connecticut	Maryland*	Oregon	
Florida*	New Hampshire*	South Carolina	
Georgia	New York*	Utah	

III. States Reporting Certification Is Being Considered

Arizona	West Virginia

*States with both certification and license requirements for occupational therapists.

Professional Impact. Occupational therapists also have a national professional certification system. The American Occupational Therapy Association (AOTA) in cooperation with the American Medical Association Council on Medical Education operates this program. The thirteen states with licensing laws covering occupational therapists (OTs) have taken the approach of accepting certification by AOTA as the prerequisite for state licensing. A survey of state education agency certification directors conducted by AOTA (Davy, 1978) revealed the following:

Out of forty states responding, twenty-six states accepted certification by AOTA and nine states accepted the state's license. In addition, AOTA reported one state (Florida) required teacher certification in addition to therapist credentials and there were four other types of requirements. In Colorado, for example, all therapists must take a course in P.L. 94-142.

Physical Therapist (PT)

As reported in the December 1978 Newsletter of the American Physical Therapist Association (APTA) and in the Book of the States (Council on State Government, 1978-79), all states license those practicing physical therapy. Research indicates physical therapists are also certified in twenty-four states (PRC, 1979). These states are Alabama, Alaska, California, Colorado, Delaware, Florida, Illinois, Iowa, Kansas, Louisiana, Maryland, Montana, Nebraska, New Hampshire, New Jersey, New Mexico, New York, North Carolina, Ohio, Rhode Island, Texas, Virginia, Washington, and Wisconsin. In addition, Arizona and West Virginia reported they are considering certifying PTs. As in the first example, PTs have national certification of members and accreditation of programs. APTA, like AOTA, cooperates with the American Medical Association Council on Medical Education to approve training programs and certify graduates. No studies or data comparing existing licensing and certification requirements for PTs could be found in the literature or obtained from other sources. In view of this void, there appears to be a need for policy makers to identify the differences and assess the policy implications in each individual state.

Social Worker

Table 3 lists states which regulate social work as reported by NASW (Johnson, 1978) and states with certification for social workers as reported by state certification officers for the Policy Research Center study (PRC, 1979).

Table 3
STATE PROCEDURES FOR THE REGULATION
OF SOCIAL WORKERS

I. States Requiring Licensure or Registration (Johnson, 1978) (N-23)

Alabama*	Illinois*	Massachusetts*	South Carolina*
Arkansas	Kansas*	Michigan*	South Dakota
California*	Kentucky*	New York*	Utah*
Colorado*	Louisiana*	Oklahoma	Virginia*
Delaware	Maine	Oregon	
Idaho*	Maryland	Rhode Island*	

II. States Requiring Certification As Reported By State Certification Officers (N=34)

Alabama*	Indiana	Nebraska	South Carolina*
Alaska	Iowa	Nevada	Tennessee
California*	Kansas*	New Hampshire	Utah*
Colorado*	Kentucky*	New Jersey	Vermont
Connecticut	Louisiana	New Mexico	Virginia*
Florida	Massachusetts*	New York*	Washington
Georgia	Michigan	North Carolina	Wisconsin
Idaho*	Minnesota	Rhode Island*	Wyoming
Illinois*	Montana		

III. States Considering Certifying Social Workers

Arizona	Arkansas

*States with both certification and license requirements for social workers.

Johnson's analysis of state laws regulating social work practice revealed that twelve of the twenty-three states required a license to practice, nine others required registration of the title, while two state's laws establish both registration and licensure requirements. Essentially, registration means that only persons registered in the state may call themselves by the state's legal social worker title. Depending on education and experience, terminology for licensed professionals in this field include: social worker, licensed clinical social worker, registered social worker, social work associate, certified social worker,

clinical social worker, master social worker, graduate social worker, etc. In fact, Johnson's report reveals over twenty such titles currently in use in the states. A further discussion of the policy implications between licensing and registration is presented in Chapter III.

A comparison of states listed in Table 3 reveals that a total of forty states require either licensing/registration or certification of social workers and fifteen states require both credentialing procedures if personnel work in schools. Thus, research indicates potential gaps or conflicts in social work regulation as well as in the other fields discussed.

Speech-Language Pathologist

As indicated earlier, the services provided by speech-language pathologists (title preferred by members of the American Speech, Language and Hearing Association) may be considered either special education or a related service depending on state policy. Personnel in this area comprise the largest group of related service providers to handicapped children. Forty-two states with the exception of Arkansas, Hawaii, Maine, Massachusetts, Missouri, New Jersey, Oklahoma, and Oregon offer certification to speech-language pathologist. Hawaii's exception is due to the state education agency's requirements for term of employment. Since speech therapy is needed on a year-round basis, pathologists are often employed for more than the school year. Therefore, to avoid conflict with other school employees, pathologists in Hawaii are employed by the state's Civil Service Commission.

The American Speech, Language and Hearing Association (ASHA) reports that thirty-one states require licensure for speech professionals. The Council of State Governments' 1978-79 Book of the States (p. 399) listed twenty-six states with such requirements (see Table 4). Such growth in the area of speech pathology is indicative of the growth of state licensure laws governing other occupations.

There is, however, another policy distinction which can be made regarding state licensing laws for speech and hearing pathologists. States which license speech-hearing personnel as opposed to speech-language persons vary as to whether teachers of the deaf and hearing impaired are included along with speech pathologists (Quick, 1976). Thus, state certification requirements may be in conflict with licensing laws. One alternative solution to this conflict is found in Oregon's licensing law for speech pathologists which states:

> Nothing in the chapter is intended to restrict any person holding a Class A certificate issued by the Conference of Executives of American Schools of the Deaf from performing the functions for which he qualifies. (681.230(7))

Table 4
STATE PROCEDURES FOR THE REGULATION
OF SPEECH-LANGUAGE PATHOLOGISTS

I. States Requiring Certification (N-42)

Alabama	Indiana	Nevada	Tennessee
Alaska	Iowa	New Hampshire	Texas
Arizona	Kansas	New Mexico	Utah
California	Kentucky	New York	Vermont
Colorado	Louisiana	North Carolina	Virginia
Connecticut	Maryland	North Dakota	Washington
Delaware	Michigan	Ohio	West Virginia
Florida	Minnesota	Pennsylvania	Wisconsin
Georgia	Mississippi	Rhode Island	Wyoming
Idaho	Montana	South Carolina	
Illinois	Nebraska	South Dakota	

II. States Requiring Licensure (N-31)

Alabama*	Indiana	Montana	Oregon
Arkansas	Iowa*	Nebraska*	Rhode Island
California	Kentucky	Nevada*	South Carolina
Connecticut	Louisiana	New York	Tennessee
Delaware	Maine*	North Carolina	Utah
Florida	Maryland	North Dakota	Virginia
Georgia	Mississippi	Ohio	Wyoming
Hawaii	Missouri	Oklahmoa	

*Certification in these states was reported by ASHA, other states were included in the Book of the States, Council of State Governments.

School Psychologist

All fifty states license psychologists at the present ime (Brown, et.al., NASP, 1980 and American Psychological Association (APA), Office of Professional Affairs, 1978). According to NASP and APA data, most states require a doctoral degree for licensure for independent practice. Less than twenty states also credential those with a master's degree as "psychological assistants" or "associate". These later function under the supervision of the doctoral licensed psychologist. Seventeen states now offer licensure in School Psychology and some

state education agencies and state licensing boards jointly establish standards for school psychologists (Brown, et.al., NASP, 1980). As noted in the October 1978 Newsletter of the Office of Professional Affairs of the American Psychological Association, however, a license is not always required for employees of some states' mental health systems. The implications for state education agency officials are twofold. First, caution must be exercised to verify credentials of those with whom contractual arrangements are made. This is especially important if third party insureres reimburse for services. Second, existing credentialing reciprocity agreements, as well as future ones being developed, will need to be carefully evaluated for language or provisions which unintentionally exclude such personnel.

Certification: State of the Art. State departments of education in forty-five states certify school psychologists for delivery of services in school settings (PRC, 1979). In addition, fifteen states certify psychometrists and/or educational diagnosticians solely to perform assessment functions in schools; while the states of Missouri and New Mexico offer both credentials. These states are listed in Table 5. A master's degree in psychology and/or a prescribed course of study is the usual requirement for certification as a school psychologist (APA News, October 1978). However, as Brown's study points out, states are tending toward multilevel certification when additional credit hours and/or a higher degree are required for higher levels(s) of certification. Of the ten states reported by Brown to offer certification based on a Doctorate, all also offer a Master's level certificate. Professionals certified by state education agencies as school psychologists may not engage in the independent practice of psychology outside of school settings unless they also meet state psychology board licensure requirements.

Table 5
CERTIFICATION OF ASSESSMENT PERSONNEL REPORTED BY STATES (PRC, 1979)

I. States Reporting No Certification of School Psychologists

Arkansas	Missouri	North Dakota
Hawaii	New Mexico	(being developed)

II. States Reporting Certification for Psychometrists/Educational Diagnosticians

Alabama	Idaho	New Mexico
Alaska	Indiana	South Dakota
Arizona	Kentucky	Texas
Delaware	Mississippi	Wyoming
Georgia	Nebraska	

School Nurse

The Council of State Governments' 1978-79 Book of the States (p. 399) reports that all states license practical nurses and registered/professional nurses. As indicated in Table 6, personnel in this area are also certified by 27 of the state education agencies (PRC, 1979).

Table 6
CERTIFICATION OF SCHOOL NURSES REPORTED BY STATES*

I. States Currently Offering Certification

Alaska	Iowa	Montana	Pennsylvania
California	Kansas	Nebraska	Rhode Island
Colorado	Kentucky	Nevada	Texas
Delaware	Louisiana	New Jersey	Vermont
Idaho	Maine	New Mexico	Washington
Illinois	Michigan	New York	Wyoming
Indiana	Minnesota	Ohio	

II. States Reporting Certification of School Nurses is Being Considered

Arizona	South Carolina
Arkansas	West Virginia

*Source: Policy Research Center, 1979

Approval for Funding in Lieu of Certification. Of the states with no education agency certification for school nurses, some approve practitioners for funding purposes only. Thus, for example, the special education component of Montana's Department of Public Instruction approves funding for persons hired as school nurses based on training course work.

Professional Initiative. Proposed legislation in Montana would give the Superintendent of Public Instruction the authority to adopt a specialist certification. According to H.B. 864, however, practitioners would have to apply to Montana's Board of Public Instruction to be included under the certification title "specialist". Financial and staff availability issues affect such decisions. School nurses in Montana, licensed by the state's occupational licensing board, received no support in their recent bid for certification. Such a credential was desired so that school nurses would be paid on the school system's salary schedule, which is higher than nurses' salaries in the state.

Other Related Services Personnel

Services provided by some personnel, such as school bus drivers, while legally under the definition of related services are services of a different nature than those discussed previously in this chapter. While research for this paper has not revealed specific state policies regulating the qualifications of school bus drivers, these are known to exist. An argument may be made for including this group of persons in special training programs geared at understanding the school system as an institution on the same basis that such arguments were offered in the case of school social workers and the traditional health service professions. A more compelling need for training would seem to exist for those drivers responsible for transporting handicapped students. This discussion identifies the need for policy options regarding supplementary personnel preparation. State education

agencies may consider several options to insure that personnel have the knowledge and skills necessary to work effectively in or with the public educational system and to meet the unique needs of handicapped students. These options may be grouped into three main areas: personnel training, job activity restrictions, and certification options. They are presented in Chapter III.

Representative at IEP Meetings

Research findings indicate that IEP participants "required to provide or supervise the provision of special education" are in fact so required by only a handful of states. State policy in forty-six states requires that a representative of the local education agency who meets the requirements of §121a.344 participate at IEP meetings. Information acquired from a review of state statutes, regulations and FY '78 Annual Program Plans indicated that principals frequently function in this capacity (INSIGHT, January 1979). Related to this issue is the requirement in the seven states of California, Colorado, Georgia, Kentucky, Massachusetts, Virginia, and Washington (PRC, 1979) that principals have special education experience or knowledge.

Summary Observations

Several conclusions can be drawn from the discussion of state certification and licensing policy presented in this chapter concerning current practices in the regulation of personnel standards.

- The most common method of both certification and licensing is graduation from an approved program. Thus, current practice affirms the circular relationship between accreditation and licensing.
- Evidence can be found for the claims that the credentialing process serves the interests of practitioners licensed rather than protecting consumers.

- There exists wide variation among states with respect to the kinds of related service personnel certified and/or licensed, leaving some states with gaps in policy in this area.
- The clinical or professional training of personnel may not include or adequately prepare them for roles in educational settings.
- Although states have taken initiatives to make the credentialing process reflect current mandates regarding handicapped children, no uniformity of opinion exists as to what policies are needed.
- The major difference between certification and licensing standards include education and degree requirements.

Chapter III
ISSUES IN THE CREDENTIALING OF RELATED SERVICES PERSONNEL

Research into the current practices in states licensing and certification of related service personnel revealed several significant issues. The ultimate impact of these issues must be assessed in each state. Toward that end, this chapter will highlight those issues of potential consequence to policy makers.

Title Protection v. Activity Restriction

The distinction between licensure and registration is an important one for the understanding of policy implications. Registration acts control the use of certain occupational titles. Licensing, on the other hand, goes beyond mere title protection to restriction of the activity of practicing the profession to those licensed by the state to do so. As presented in Chapter II, one effect of registration acts has been a proliferation of titles in use by states, for example more than 20 titles are used for social workers. This makes it difficult for consumers to know who is qualified from state to state. Another effect is a potential legal conflict between board of education certification standards and licensing board standards.

Potential Legal Conflict

Because state licensing laws include restrictions on the use of titles, a potential conflict may exist with certification policy. The state of Maine illustrates this point in the case of psychologists. In Maine individuals who have not been licensed by the State as "psychologists" may not be certified as "school psychologists" by the state's education agency. The reason is that Chapter 321 of the Public Laws of 1967 made it a misdemeanor for anyone to "hold himself out to the public as a psychologist or psychological examiner" who was not duly licensed (32 M.R.S.A. §3812).

Maine's state standards for certification of educational personnel, approved by the State Board of Education included a "school psychologist" classification.

The academic and experience qualifications of the two systems differed. School psychologists were not eligible as a rule, to be licensed by the state.

Assistant Attorney General for the State of Maine, Waldemar G. Buschmann, ruled that the standards of the Board of Education were in conflict with state licensing laws. His memo dated December 20, 1976 explains:

> 32 M.R.S.A. §3812 specifically prohibits "any individual or organization" from presenting himself or from being presented "to the public by any title incorporating the name 'psychological', 'psychologist', or 'psychology' other than those licensed by this chapter..." Since teachers and counselors "in recognized public and private schools" are not to be limited by chapter 56 of Title 32 M.R.S.A., in their professional pursuits, this law exempts such people from being penalized for administering necessary tests, etc., which are normally reserved by §3811 to a psychologist. However, this Legislature does not allow teachers and counselors to use the title psychologist unless they are duly licensed by the State. 32 M.R.S.A. §3812. Therefore, since the Legislature has specifically defined who may use the title "psychologist", the Board of Education's standards for a "school psychologist" must include that the person be licensed by the State as a psychologist.

Traditional Training Inadequacies

Evidence from several sources indicates the need for further training of related services personnel for two reasons. First, many of these professionals were trained in a traditional medical model to function in traditional clinical settings. Therefore, they lack a basic understanding of the public school system and the process of education. Second, traditional preparation programs failed to adequately prepare personnel for interventions with handicapped students and their families.

For example, Davy's (1979) report of American Occupational Therapy Association's 1978 state certification survey highlights the unique training needs of traditional health care providers in public school settings:

> Several respondents indicated that additional training involving the administrative structure of school systems would be very helpful to occupational therapists who work in the schools. Other skills necessary for occupational therapists working in the schools include the need for instruction on how to work on multidisciplinary medical/

> educational teams and in the dissimilarity between the school systems and the rehabilitation setting; the use of flexible scheduling to meet educational priorities; selling occupational therapy to the education system so that educators don't feel usurped by occupational therapists in their schools; training in the use of educational plans (i.e., individualized educational plans); and the usefulness of pediatric practicuum experience. (Appendix)

Additional support for specialized training comes from the field of social work. Pennekamp (1978) in discussing the unique training needs of social workers in school settings cites the failure of current social work curricula to adequately prepare graduates with even an introduction to many of the aspects of school practice. For example, she states that more is needed to be known about the skills parents need in working with teachers and questions the effect of parents and teachers mutually engaging in educational decision making on social workers "parents as clients" orientation. More is also needed to be known, says Pennekamp, about the school systems methods of interfacing with other agencies.

The NASW Task Force on Social Work in the schools developed standards for the attainment of competence in the practice of school social work. Standard No. 1 is as follows:

> School social workers shall possess knowledge and understanding basic to the social work profession and specialized knowledge and understanding of the public school system and the process of education.

Pennekamp in the following statement contends that such understanding is necessary for all social workers:

> If one views the combination of the family, the neighborhood and the school as the natural environment for child rearing, then it must be asked whether social workers who are being prepared for family and children's agency work can remain aloof from an understanding of the social -- an institution central to the lives of children, youths and families. (p. 62)

Moreover, Kabler (1977) in an article discussing the challenge of P.L 94-142 for school psychologists, made several points regarding the inadequacy of training programs for psychologists in light of this mandate:

- Assessment and programming skills to work effectively with preschool

and young handicapped adults and with severely and multiply handicapped children are lacking in university programs which prepare psychologists.

- Few psychologists have knowledge of curricular materials used to teach handicapped children, making it difficult for them to offer appropriate educational recommendations.
- Counseling skills for working with handicapped children and their parents need to be developed.

To address these needs, Kabler suggests that states reevaluate certification requirements for psychologists, in addition to providing in-service training. He concludes that current federal mandates imply a need for updating educational rather than psycho-therapeutic skills.

Dual Standards. Analysis of the data indicates the major difference in the standards of the two credentialing systems (licensure and certification) is in the area of education/degree requirements. Ramifications for policy makers are primarily financial but also may effect the numbers of personnel available. Salary differentials and other fiscal impact relating to authorizations for third party payments, for example, results from such differences. Some education policy makers, Montana is one example, feel that raising the degree requirements for some related service personnel working in the public schools would negatively impact on the availability of staff, as well as strain fiscal resources. Thus, a dual standard exists in many states, with one set of requirements for public school personnel and another, usually higher standard, for those in private practice and other settings.

State and Professional Interests

Each of the related service personnel discussed in this paper have what may

be called a national professional certification system. As mentioned earlier, the American Occupational Therapy Association (AOTA) and the American Physical Therapy Association (APTA) cooperate with the American Medical Association Council on Medical Education.

The National Association of Social Workers (NASW) has developed a model licensing act based upon NASW standards. This act recommends three levels of licensure based upon degree earned. However, it would restrict private practice of social work to those licensed at the highest level under the model act who, in addition, have two years of supervised experience in the field to be practiced. The requirements of this model act for private practice are the same as the requirements for ACSW certification (Academy of Certified Social Workers) except that ACSW certification requires membership in NASW. The number of states who have adopted these requirements in either licensing or certification policy is not reported data.

Support for professional certification can be found in other policy in the case of occupational therapists, however, as indicated in Chapter II. In addition to recognition in licensing and education agency certification, support for AOTA certification is found in Medicare regulations, a number of private insurance agencies and the Joint Commission on Accreditation of Hospitals.

Speech professionals may be certified by the American Speech, Hearing, and Language Association; psychologists, by the American Psychological Association. Nurses receive their professional certificate when they graduate from an approved program. In actual point of fact, however, it makes little difference whether or not a state requires a license for OTs, PTs, or nurses. All OT training programs and schools for example are accredited by the AOTA/AMA. The exam required by licensing boards is the same one graduates of OT programs must pass. Thus, accreditation is essentially licensure.

Potential abuse, however, may be found in licensing law restrictions which seem to benefit the professional groups more than consumers. Consumer or public representation on state licensing boards is one attempt to make boards more responsive and accountable to consumers.

An Accountability Option: Consumer Involvement. Membership on State psychology examining boards may be cited to illustrate. Eleven states include so called "public" or citizen members on this board in addition to members of the profession in an attempt to better represent the public interest. The remaining thirty-nine state boards consist solely of professional psychologists. The states with non-psychologist members include California, Hawaii, Iowa, Maine, Minnesota, New Jersey, Ohio, Oregon, South Dakota, Vermont, and Wisconsin. While this practice has been criticized as ineffectual "tokenism" in the past, Shimberg and Roederer (1978) report that innovative policies such as California's Public Member Act (S.B. 2116) are challenging these criticisms with new perspective.

The Problem With Generic Licensure. Licensing is generic. That is, one license is issued for all practitioners in a field regardless of major area of emphasis. Psychologists have attempted to differentiate the specialties of their members. Because practitioners recognized the need for specific standards to distinguish psychologists working in the health care field from others, they established the National Register for Health Service Providers in Psychology. Established in 1975, the Register enables consumers, third party payers, and decision makers to identify which of the generically licensed psychologists are specially trained and qualified to provide health services. Created to exist independently of the American Psychological Association or any state licensing board, the Register lists over 12,000 psychologists with health care training and experience. According to APA (1979), listing in the Register is currently

accepted by the Civilian Health and Medical Program of the Uniformed Services (CHAMPUS), the Aetna and Blue Cross/Blue Shield Federal Employees Health Benefits Plans, along with other groups.

No such method currently exists to help education personnel identify those generically licensed psychologists with training and experience in school psychology, or similar specialities of other types of personnel. This issue is closely related to the issue of traditional training inadequacies discussed previously as well as the following issue.

The Third Party Connection

Insurance reimbursement and pay out policies and policies of other third party payers may have the effect of controlling qualifications of professionals hired in some facilities. This in turn can effect the type of services provided to children in these settings. Research data have been presented indicating approval by third party payers for certain professional qualifications. If, for example, an insurance company will only reimburse for services provided by psychologists listed in the National Register for Health Service Providers in Psychology, parents or schools will end up footing the bill if credentials aren't verified with insurance policies when contractual arrangements are made.

Chapter IV
OPTIONS IN PERSONNEL REGULATORY PRACTICES

As the previous chapter indicated, states have historically sought to protect the public interest and assure qualified personnel to deliver services through certification and licensure requirements. In addition, variations among states policies were shown to exist with respect to the existence and contents of these requirements as they concern related services personnel.

Research findings indicate that states attempting to meet both the letter and the spirit of P.L. 94-142 must have accepted two assumptions. First, they must have established or they must recognize personnel standards. Federal policy requires that certification, licensure, registration or comparable requirements be enacted or recognized by state education agencies. Second, the content of these requirements must originate from the needs of the children to be served. These two assumptions serve as the basis for determining which policies are needed in personnel regulatior

While this paper discussed some of the main issues, there are other dimensions on which to compare certification and licensure. (1) The validity of certification vs. licensure for each different kind of job. (2) The relation between the rigor of the standards and manpower needs. (3) A discussion of the issues from a geographic or population perspective. For example, the impact on rural LEAs specifically where generalists rather than specialists are more often needed. (4) The relationship between categorical credentialing and labeling of children.

Undoubtedly a change in SEA personnel standards will effect each local school district, the status and salaries of professional groups within the states and university staffing. course offerings and degree requirements. For these reasons, states must carefully consider such changes. A number of variations on the policy options to be discussed could be considered to help smooth the transition from old

to new policies and permit flexibility where needed to ease the impact of such policies on the groups mentioned above. These include: the establishment of temporary credentials or the temporary recognition of licenses to respond to manpower needs for the next few years; job protection for uncertified or unlicensed professionals until they retire; and methods for gradually addressing specialized practice and/or standards over a fixed time period.

Policy Area 1 - Policy Gaps and Conflicts

As indicated in Chapter II, basically three situations exist with respect to state practice in personnel regulation resulting in gaps and/or conflicts in policy. States may have licensure but no certification requirements; states may have both processes governing certain professions; and states may have neither of these requirements. Each situation presents unique problems for policy development. In the following discussion, policy alternatives relative to these three situations will be presented along with their ramifications for policy makers.

Situation A - Options for States With Licensure But No Current Certification Requirements

States which have licensing requirements but where no certification requirements exist are faced with two policy alternatives for the future: They can establish policy recognizing the license as an indicator of a qualified professional or they can establish certification requirements in addition to licensure.

Policy Option 1. SEA recognition of the license (state or professional if no state standard exists). Review of state policies indicates that many licensing requirements mandate possession of a higher academic degree than required by state education agencies for certification. In view of this observation, if states with

licensure but no certification maintain this status quo, the result would be likely to have economic implications.

Research indicates that such an alternative would seem to limit the availability of qualified personnel to those holding an advanced degree while keeping payroll costs high due to the larger salaries Master's and Doctoral level staff can command. On the other hand, quality and range of services are felt to increase with additional training. Indeed, many professional organization standards maintain that a Master's degree symbolizes a miniumum level of competence. There are strong efforts toward national recognition of these professional standards by almost every practitioner association.

Analysis reveals three additional ramifications of accepting licensure for school employees. First, licensure requirements for most professions is generic: that is, the license does not limit the holder's practice to any one specific area. For example, as previously indicated, a license for a psychologist in most states includes clinical, counseling, industrial-organizational and school psychology. It may be argued that an education agency's acceptance of a licensed psychologist may yield an individual whose professional qualifications not withstanding, is unprepared for the particular roles required for effective functioning in a school setting. Second, the salary differential if higher may create opposition from practitioners in fields at a lower pay level. Third, the status of the credential is in the hands of another administering body. Licensing laws may require updating of professional credentials while licensing boards may not enforce this requirement. A state education agency that controls the credential itself is aware of the person's status at all times. One way to obtain this control would be for the SEA and the state licensing body to jointly develop the standards which would result in the license being recognized as the credential to meet the intent of P.L. 94-142.

Policy Option 2. The second alternative, that of adding a certification title, likewise has positive and negative aspects. On the positive side, it would enable states to set standards based upon the unique needs of the education agency and those of the children to be served. The added certification requirements could be directed toward the roles and functions of the personnel in the school system. In addition, if states decided to certify persons with a bachelor's degree, theoretically this would enable localities to keep costs down and to fill vacancies easier. As Table 7 indicates, there is a current shortage of related service personnel, some of which may be overcome if bachelor level staff were hired.

Table 7*
STAFF AVAILABLE AND NEEDED

	Available 1976-77	Needed 1977-78	Needed 1978-79
Psychologists/ Diagnostic Staff	17,730	21,713	25,659
Speech Pathologists/ Audiologists	11,501	13,256	15,937
School Social Workers	5,880	7,975	10,218
Occupational and Recreational Therapists	5,041	6,852	8,430

*PROGRESS TOWARD A FREE APPROPRIATE PUBLIC EDUCATION, U.S. Department of Health, Education, and Welfare, Office of Education, Appendix D, Table D-3.5, January 1979.

Policy Option 3. New York state issues permits to school districts employing personnel to fill professional positions for which no certification requirements exist. The school district must submit an application, a detailed job description and a listing of the qualifications deemed necessary for a

candidate for the position. Occupational therapists and physical therapists work under permit authority of the board of Regents rather than certification authority in New York.

This option enables school districts to identify community specific needs. The feasibility of its adoption would be greater if some minimal qualifications existed to prevent the hiring of personnel with little competence. One possible negative impact may be to limit the georgraphic mobility of the practitioner since this option permits varying standards in different areas. However, this is not necessarily so, as long as school districts have the flexibility to hire whom they want. The increase in paperwork would be great for jobs where many staff were employed. If the SEA made final approval, time could also be a factor. In actuality,this option is an alternative to the certification process and may be a viable option for Situation B as well.

Situation B - Options for States With Neither Licensure Nor Certification Requirements

Presumably states with neither system of credentialing rely upon the good faith and initiative of hiring agencies to set standards for personnel qualifications. Such flexibility may be said to have a certain appeal, though there are grave pitfalls. According to the Children's Defense Fund's report of EPSDT (1977)

> There is much evidence that personnel other than physicians have the capacity to provide routine child health care competently, to the greater satisfaction of patients, and at less cost than physicians.

While this example explains why a shortage of doctors is no excuse for the lack of adequate child health service, it has implications for other fields as well. Presumably, there are some aspects of jobs performed by related service personnel which can be performed by others in certain situations. Consequently, states may prefer flexibility in standard setting in areas of personnel shortages.

Yet lack of adequate training and supervision may render the use of inexpensive or unqualified staff hazardous to the safety and welfare of clients. This caution, in addition to the P.L. 94-142 requirement that personnel meet state education agency approved or recognized requirements, would seem to compel states without personnel standards to develop corrective policies immediately. Establishing either certification or licensure for the occupation(s) not currently regulated are two options policy makers may consider to correct this policy gap. The choice of licensure would necessitate passage of a state statute. In this event, state education agencies would need to develop a policy acknowledging acceptance of a license credential. On the other hand, research indicates that if states establish certification requirements, consideration of the following options may help insure qualified personnel:

- Provisional or temporary certification pending completion of training in working with handicapped students in school settings.
- Certification renewal based upon special education continuing education.

Instead of either of the above options, states may wish to establish an alternative process which would satisfy the requirements of P.L. 94-142. It may be recalled that Regulations §121a.12 requires state education agency approval or recognition of certification, licensure, registration or other comparable requirements. While research does not indicate that any of these alternatives are currently in use in the states, policy makers faced with establishing new territory in this area may consider the following options from professional literature:

- In lieu of certification, each SEA can establish minimum standards regarding personnel qualifications by profession and maintain a register of all persons who meet these requirements (Shimberg and Roederer, 1978). It may be recalled that

psychologists employ this option to identify members of their profession who specialize as health service providers (see page 32). Such a register must be monitored to assure compliance with the minimum requirements.

- Permitting local or regional examining boards to establish standards based upon the needs of the area (Study Commission, 1976).
- Regulating the school as an employer rather than the individual professional, i.e., licensing or accreditation of schools and establishing institutional standards (Shimberg and Roederer, 1978) in accordance with minimum standards established by the state.

Situation C - Options for States With Both Licensure and Certification Requirements

There are two issues of concern for policy makers faced with dual credentialing systems - certification and licensure. The first relates to possible legal conflicts such as were found to exist in Maine regarding psychologists (see page 27). The second issue - duplication of effort - raises economic and political questions. How much regulation is enough and when is it too much? Policy makers will need to answer this question before determining which of the following policy options to pursue. Both options present a theme of policy streamlining to minimize duplication of effort.

Policy Option 1. States contemplating adoption of licensure requirements where certification of the profession already exists may consider exempting personnel working in public schools from the requirement of licensure. Adoption of this policy alternative would permit schools to set personnel

standards and salaries based upon education specific needs and resources. Such an alternative would also avoid the legal conflict evidenced in Montana.

North Dakota presently employs this option as it pertains to school psychologists. It is interesting to note, however, that North Dakota's board of psychological examiners retains partial standard setting authority. The text of N.D. Century Code, Section 43-32-30 (1) is as follows:

> Any person employed by a public school whose activities and services are restricted to the practice of psychology in the district or service unit of employment. This exemption shall apply only when the person to be exempted has received a master's degree in school psychology from an accredited graduate training program. Standards will be established by mutual consent of the board of psychological examiners and the department of public instruction.

Policy Option 2. The counterpart of the first option would be to streamline the certification requirements. This may be accomplished in two ways:

- Elimination of certification in favor of licensing for those professions which are licensed by either the state or by the profession.
- Reducing the certification process to verification of education specific criteria for each profession for individuals holding a valid professional license.

Policy Area 2 - Supplementing Professional Preparation

Personnel Training Options

At least three options exist to prepare related services personnel to work with handicapped students in school settings. These options are:

- Adding college courses requirements relative to these roles and functions.
- Introducing in-service programs to provide necessary training.
- A combination of pre-service and in-service training for these personnel.

To improve the preparation of related service personnel, policy makers may want to consider cooperative manpower planning structures fuctioning under federal directive since 1974 (Schofer and Duncan, 1978). Through this vehicle institutions of higher education working with state education agencies may evaluate existing personnel preparation programs for related services personnel to determine the most effective structure and processes through which course content regarding the handicapped student population and working in school settings can be incorporated into pre-service training.

Nevada, for example, requires these additional courses in the following areas to prepare psychologists for their roles under P.L. 94-142 and state law: psychology and education of the exceptional child, psychology and education of children with learning disabilities, diagnosis of learning disabilities. In addition, these two courses relating to the characteristics of school systems are required: Curriculum Development and Cultural and Social Foundation of Education.

Texas, on the other hand, adopted an "infusion" policy for general teacher education which may be considered as an option for training related services personnel. If this option were utilized, information related to handicapped persons would be incorporated into all professional course work, rather than being a separate course of study.

The case for the in-service option was clearly stated by Reynolds (1977):

> It is quite clear that the training activities designed to meet the new and emerging needs (of handicapped children) will need to be weighted toward an inservice rather than a preservice format. Many school districts are already "over supplied" with teachers in a general sense; rather than recruit a totally new staff for innovative and expanding programs, the districts may wish to redirect their present personnel into new roles... (p. 37)

Reynolds' thesis was that colleges were neither sensitive nor prepared for the task of preparing personnel to meet the needs of severely and profoundly handicapped children, specifically at the present time. Policy makers will need

to assess the capability of colleges as well as their own resources in determining the appropriate policy or combination in this area of personnel training.

Job Activity Restrictions

Policy makers who, due to personnel shortages, must hire personnel skilled in professional skills but without adequate preparation or experience working with handicapped students and/or working in school settings may determine to restrict the working autonomy of such personnel. This may be accomplished by providing for a probationary period of time during which such skills may be acquired and appropriate standards met. Perhaps the most obvious course of action within this policy area would be to require that the personnel function only under the supervision of a more experienced colleague or other supervisor appointed by the local school district. This option assumes that competencies or appropriate standards concerning the roles and functions for working with handicapped children and youth in the school system have been established for each profession.

Certification Options

A variation of some of the alternatives discussed above could result in changes in certification provisions. Policy makers may wish to issue provisional certificates and make issuance of a regular certificate contingent upon successful completion of requirements such as participation in in-service programs, completion of additional specified course work, internship, practicum or other similar requirements.

Thus, in Kentucky, a one-year supervised internship in the first year of employment is required for all school psychologists. During this time a provisional certificate is held. The standard certificate for school psychologist is awarded upon successful completion of the internship. Provisional or limited certificates are non-renewable.

A second certification option policy makers may consider relates to certification renewal requirements. Renewal periods range from four to ten years (Gilmore & Argyros, 1977). As the field of special education is such a dynamic one, policy makers may opt for continuing personnel development of either a pre-service or in-service nature in the area of special education as a requirement for certification renewal. These alternatives would enable those with medical orientation and expertise, for example, to receive training and transfer their skills to the education setting and handicapped children.

Adopting permisaive certification for licensed personnel is a third option. An optional certificate gives professionals who have extra courses or experience in school settings and/or working with handicapped students a chance to get professional recognition of such training beyond licensing requirements. Incentives such as salary increases, payment for extra training, release time, etc., may be offered to encourage professions to seek certification. A district may wish to adopt this alternative when mandating certification would produce undue hardship, result in loss of staff or carry an undersireable "grandfather" clause. This type of option is currently applied to nurses serving in school districts in Wisconsin (Wisc. Rules PI 3.20(2)).

Chapter V
INFORMATION COMPONENTS NEEDED BY STATE POLICY MAKERS

The data presented in this paper regarding state certification and licensure requirements for related services personnel indicates general policy and procedural similarities and differences between these processes across the nation. However, it must be recognized that state specific information is needed by policy makers before decisions can be made regarding the adequacy of existing policy or the need for change in the state's personnel credentialing system(s).

Of necessity, each state will need to investigate its own situation with respect to personnel standards. Such an investigation will enable policy makers to indentify the differences between certification and licensure requirements in their respective states; to determine whether policy or procedural conflicts or gaps exist and to formulate any necessary corrective solutions.

Through the analysis of research findings, a series of questions was developed to provide a framework in which state regulatory policy may be analyzed. In each state, policy makers will need to analyze the answers to these questions in order to determine the policies and procedures needed to clarify and harmonize state credentialing requirements with P.L. 94-142 requirements and with the needs of handicapped children.

Identifying the Differences

1. What related service personnel are required to be certified, licensed or registered in the state?

An understanding of state policies regulating related service personnel is critical if those charged with implementing P.L. 94-142 and Section 504 as well as state requirements are to understand their role and assess the need for policy development in their state.

2. What state agencies have personnel regulatory authority?

The location of regulatory agencies within state governments vary from independent boards to boards under consumer affairs authorities, to those staffed by practitioners and established within human service agencies. The location of these authorities has implications for coordination of policy.

3. For each related service personnel, the following should be identified as a certification or licensing requirement:

- Levels of practice regulated - Regulations may offer levels of credentials for graduate degree holder, undergraduate degree holders and holders of degrees from two-year training programs. Job responsibilities, salary level, and job autonomy may be related to level of credential held. Should the scope of an individual's practice be different in agency A than in agency B?

- Education/degree requirement - What are the implicatons for purchasing services of related service personnel when certification requirements specify a bachelor's degree and the licensing requirement is a master's degree? What is the relationship between personnel demand and degree earned? What would be the political and fiscal ramifications of having one group more qualified than others?

- Years of experience required - It is a difficult task for local education administrators or for state officials to determine the degree of conformity between state credentials. When there are several levels with different requirements at each level, this task is further complicated.

- Internship requirement - Certification requirements may include a year's experience practicing the profession under supervision in a school setting. Licensure requirements may specify a variation in length or in setting or both.

- Exam required - Policy makers will need to determine if there is a substantial difference between tests required for certification and those examinations required for licensure. Areas of comparison include content, professional and legal testing standards. If no test exists in one process how does this effect hiring decisions?

- Period of renewal - In licensure, this may be annually, or every two or three years. In education, this is sometimes every six years or not required at all. For those professions being considered for state certification, should renewal period follow professional, licensing or other state certificaion guidelines?

- Exclusion/exemption - Some licensure laws exclude while others include those in private practice, private agency employees, public agency employees or those employed in federal institutions or facilities (Johnson, 1978) (APTA Newsletter, Dec. 1978) (Quick, 1976). What procedures must a state or local administrator follow before arranging for the provision of related services outside the education agency?

- Reciprocity - The states with licensure reciprocity may not be the same as the states with certification reciprocity. In addition, there may be reciprocity or endorsement agreements between certification and licensing agencies for some professions.

• Continuing education requirements - Can a permanent certificate issued based upon a valid license continue to be valid if the license lapses? Some renewal requirements may be in conflict between the two systems if such were added unilaterally subsequent to compatability or reciprocity determination. As of 1980, any new employee entering the school system in Florida will be required to pass an exam in reading and math. All therapists must have teacher certification and have taken two education courses. The impact of these requirements on contracts with other agencies remains to be seen.

4. What is the source of the requirements in state government (i.e., law, regulation, administrative policy, etc.)?

Decisions for policy changes will depend in part on the political realities beyond the requirements and the level of effort necessary for impact.

Determining If Policy Gaps or Conflicts Exist

1. What related service professions are not covered by either certification or licensing requirements?

If such a situation exists, policy makers will need to determine how they will satisfy the requirements of P.L. 94-142 Regulation §121a.380(b) regarding "qualified" personnel in light of the definition of "qualified" (§ 121a.12) discussed in Chapter I. Table 8 summarizes the current status of personnel regulations indicating that occupational therapists and social workers are most susceptible in this area.

Table 8

SUMMARY OF STATES RELATED SERVICE PERSONNEL CREDENTIALING REGULATIONS

	No. of states with either licensure or certification requirements	No. of states with both licensure and certification requirements	No. of states with neither licensure nor certification requirements
Occupational Therapist	30	5	20
Physical Therapist	50	24	0
Social Worker	42	15	10
Speech Pathologist	42	25	2
School Psychologist	50	45	0
School Nurse	50	27	0

NOTE: Certification refers to state education agency procedures. Licensure means individuals must hold a license granted by a state examining board to practice their profession in the state.

2. Which licensed personnel providing services to handicapped school children are not required to be certified?

The specific needs of licensed personnel working in the school system must be determined. The competences they will need depend upon their utilization.

3. Is training or experience related to practice in a school setting necessary?

The medical model orientation of certain licensure laws has been discussed earlier. Policy makers will need to determine the appropriateness of such an orientation or adaptability of individuals within a school setting. If a school hires newly licensed graduates with no training or experience in understanding the school system, organization, operation, teacher-therapist-community relations, or therapy-curriculum relationship for example, what will be the effect on the outcome of service for the student as well as the adults involved?

4. Where additional or fewer certification requirements exist, can these differences be justified?

Suppose, for example, speech-language pathologists with a bachelor's degree may be employed by the school district in a state while those licensed must have a master's degree. Justification for this distinction must be found in the relationship between competencies required for the job and training necessary to attain the competency. In some cases, state education agencies may prefer in-service or on-the-job training to a graduate degree or as alternatives to an advanced degree. Availability of training programs, personnel supply, and fiscal considerations influence these decisions.

5. Areas of potential conflict include:

- How or where experiences can be acquired
- Duration of training or experience
- Entry routes - approved programs, equivalent experiences, transcript analysis, proof of competence
- Differences in reciprocity
- Effect of "grandfather" clauses
- Basis for renewal - payment of fee, continuing education, reexamination, etc.
- Effects of suspension or revocation of one credential on the other

States will want to examine these issues from several points of view. Efficiency of program operation, public accountability, and policy coordination considerations will have an effect on any policy changes that occur.

6. What are the reimbursement requirements under insurance programs e.g., Medicaid or Blue Cross, regarding personnel qualifications?

Chapter I identified some of the personnel requirements in state Title XIX programs arising out of current litigation (see p. 10). Private insurers and other federal reimbursement requirements have obvious implications for school policy regarding personnel qualifications. Unless these requirements are met, districts and states may have to pay for services from their own budgets.

Conclusion

Certification and licensure are ways of identifying available related services via professional recognition by state departments of education. Incomplete or inappropriate implementation of the federal directive that state education agencies establish or approve personnel credentialing requirements can contribute to a failure to provide appropriate related services to handicapped students. It is hoped that the policy options contained in this paper will assist policy makers in setting personnel policies that result in quality services to handicapped children and youth.

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